

02 07 -02

02/04/02

JC951 U.S. PTO

Please type a plus sign (+) inside this box ☒

PTO/SB/05 (03-00)
Approved for use through 10/31/2002. OMB 0651-0002
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	30435.53USD7
First Inventor	Charles L. Sawyers
Title	MICE MODELS OF HUMAN PROSTATE CANCER PROGRESSION
Express Mail Label No.	EU088692860US

JC978 U.S. PTO
02/04/02

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.
See 37 CFR 1.27.
- ☒ Specification [Total Pages 43]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 10]
- Oath or Declaration [Total Pages 12]
 - ☐ Newly executed (original or copy)
 - ☒ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☒ Application Data Sheet. See 37 CFR 1.76

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - ☐ Computer Readable Form (CRF)
 - Specification Sequence Listing on:
 - ☐ CD-ROM or CD-R (2 copies); or
 - ☐ paper
 - ☐ Statements verifying identity of above copies

- ### ACCOMPANYING APPLICATION PARTS
- ☐ Assignment Papers (cover sheet & document(s))
 - ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
 - ☐ English Translation Document (if applicable)
 - ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
 - ☐ Preliminary Amendment
 - ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
 - ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
 - ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. transmittal sheets, check
 - ☒ Other: fee transmittal sheet

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 09 / 567,202

Prior application information: Examiner T. Ton Group Art Unit: 1632

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	26,941	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Sarah B. Adriano	Registration No. (Attorney/Agent)	34.470
Signature	Sarah B. Adriano	Date	2/4/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	01/30/2002
First Named Inventor	Charles L. Sawyers
Examiner Name	T. Ton
Group Art Unit	1632
Attorney Docket No.	30435.53USD7

TOTAL AMOUNT OF PAYMENT (\$ 370.00

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 50-0306

Deposit Account Name Mandel & Adriano

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☒
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	370.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 370.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
1	-20** = 0	9.00	0.00
1	-3** = 0	42.00	0.00
Multiple Dependent		40.00	0.00

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type)

Sarah B. Adriano

Registration No.
(Attorney/Agent)

34,470

Complete (if applicable)

Telephone

(626)395-7801

Signature

Sarah B. Adriano

Date

02/02/2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

02-07-02

HS
A
ge

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DOCKET NUMBER	ANTICIPATED CLASSIFICATION OF THIS APPLICATION:		PRIOR APPLICATION	
	CLASS	SUBCLASS	EXAMINER	ART UNIT
30435.53USD7	Unknown	Unknown	T. Ton	1632

CERTIFICATE UNDER 37 CFR 1.10:

"Express Mail" mailing label number: EU088692860US
Date of Deposit: February 4, 2002

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

By: Renato Marco P. Domingo
Name: Renato Marco P. Domingo

DIVISIONAL APPLICATION UNDER 37 C.F.R. § 1.53(b)

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

This is a request for filing a divisional application under 37 CFR § 1.53(b) of Serial No. 09/567,202, filed on May 8, 2000 entitled MICE MODELS OF HUMAN PROSTATE CANCER PROGRESSION by the following inventor(s):

Full Name Of Inventor	Family Name Sawyers	First Given Name Charles	Second Given Name L.
Residence & Citizenship	City Los Angeles	State or Foreign Country California	Country of Citizenship US
Post Office Address	Post Office Address 177 S. Westgate Avenue	City Los Angeles	State & Zip Code/Country California 90049/USA
Full Name Of Inventor	Family Name Klein	First Given Name Karen	Second Given Name A.
Residence & Citizenship	City Los Angeles	State or Foreign Country California	Country of Citizenship US
Post Office Address	Post Office Address 174 Denslow Avenue	City Los Angeles	State & Zip Code/Country California 90049/USA
Full Name Of Inventor	Family Name Witte	First Given Name Owen	Second Given Name N.
Residence & Citizenship	City Sherman Oaks	State or Foreign Country California	Country of Citizenship US
Post Office Address	Post Office Address 14727 Sutton Drive	City Sherman Oaks	State & Zip Code/Country California 91403/USA
Full Name Of Inventor	Family Name Reiter	First Given Name Robert	Second Given Name E.
Residence & Citizenship	City Los Angeles	State or Foreign Country California	Country of Citizenship US
Post Office Address	Post Office Address 10511 Kinnard Avenue	City Los Angeles	State & Zip Code/Country California 90024/USA

1. ☒ Enclosed is a true and correct copy of the prior application; including the specification, claims, drawings, oath or declaration showing the applicant's signature, and any amendments referred to in the oath or declaration filed to complete the prior application. (It is noted that no amendments referred to in the oath or declaration filed to

complete the prior application introduced new matter therein.) The copy of the prior application is as follows: 39 pages of specification, 20 claims (3 pages), 1 pages of abstract, 10 sheets of drawings, 3 pages of Verified Statement Claiming Small Entity Status and 12 pages of oath or declaration.

2. ☒ Cancel in this application original claims 2-20 of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
3. ☒ The filing fee is calculated below:

CLAIMS AS FILED

NUMBER FILED	NUMBER EXTRA		RATE	FEE
TOTAL CLAIMS:				
1 -20	0	X	\$9.00	\$0.00
INDEPENDENT CLAIMS				
1 -3	0	X	\$42.00	\$0.00
			BASIC FILING FEE:	\$370.00
			MULTIPLE DEPENDENT FEE:	\$0.00
			TOTAL FILING FEE:	\$370.00

- ☒ Applicants claim small entity.
4. ☒ Payment of fees:
☒ Attached is a check in the amount of \$370.00.
☐ Please charge Deposit Account No. 50-0306.
5. ☒ The Commissioner is hereby authorized to charge any additional fees as set forth in 37 CFR §§ 1.16 to 1.18 which may be required by this paper or credit any overpayment to Account No. 50-0306.
6. ☒ Amend the specification as follows:

~~Please delete the title on page 1, line 1 and replace with:~~

-- PURIFIED HUMAN PROSTATE CANCER CELLS --

Please replace the first full paragraph of page 1 with the following:

-- This is a Divisional application of U.S. Serial No. 09/567,202, filed May 8, 2000, which is a divisional of U.S. Serial No. 08/951,143, filed October 15, 1997, which is a CIP of U.S. Serial No. 08/732,676, filed October 15, 1996, which applications are incorporated herein by reference. --

7. ☐ A set of formal drawings (____ sheets) is enclosed.
8. ☐ Priority of application Serial No. _____, filed on _____ in _____, is claimed under 35 U.S.C. 119.
- ☐ The certified copy has been filed in prior application Serial No. _____, filed _____.
9. ☒ The prior application is assigned of record to The Regents of the University of California.

10. ☒ The Power of Attorney in the prior application is to:

Mandel & Adriano
35 N. Arroyo Parkway, Suite 60
Pasadena, California 91103

11. ☐ A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)

- ☒ Fee for excess claims is attached.

12. ☐ A petition and fee has been filed to extend the term in the prior application until _____. A copy of the petition for extension of time in the prior application is attached.

13. ☐ The inventor(s) in this application are less than those named in the prior application and it is requested that the following inventors identified above for the prior application be deleted:

14. ☒ Also Enclosed: Application Data Sheet (2 sheets), Utility Transmittal Sheet (2 sheets), Fee Transmittal Sheet (1 sheet)

15. ☒ Address all future communications to the **Attention of Sarah B. Adriano** (may only be completed by attorney or agent of record) at the address below.

16. ☒ A return postcard is enclosed.

Respectfully submitted,

Sarah B. Adriano

Sarah B. Adriano

Reg. No. 34,470

Attorney for Applicants

Mandel & Adriano

35 No. Arroyo Parkway, Suite 60

Pasadena, California 91103

626/395-7801

Customer No. 26, 941